BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	USE OF ANTI	BODIES A	GAINST A TUMO	R-ASSOCI	ATED ANTIGEN	1					
Fill in Appropriate	the specification of w forth above and/or t	hich is attached he following:	hereto. If not attached h	ereto, the applica	ation is identified by th	e attorney docket	number as sei				
Information -	The specification was filed on						as				
For Use Without Specification			ز								
Attached:	and amended or the specification	(if applicable									
	International Ap	as PCT ; and was									
	amended on	12. Nove	(if applicable)								
	(A uppredict)										
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or page 14 the page 15 the page										
	year prior to this apprior to this applicated to this applicate representative or assipatent or inventor's capplication by me or I hereby claim for inventor's certificate a filing date before the	olication, that the on, that the invention in any country in any country in the c	e the same was ever kno any printed publication e same was not in publ ention has not been pate attributed for the Uni- tivelve months (six mon invention has been file intatives or assigns, exce enefits under Title 35, U ad have also identified b ion on which priority is	c use or on sale nted or made th ted States of A ths for designs) I in any country ot as follows. nited States Coc elow any foreign	in the United States of the subject of an inventor merica on an applica prior to this application	of America more or's certificate issuation filed by me on, and that no a	than one year ted before the or my legal application for				
T 173 / 14	Prior Foreign Appl	ication(s)				Priority (Claimed				
Insert Priority Information:	A 1217/200	2 Aust	ria	08/12	/2002	f sa	-				
(if appropriate)	(Number)	(Country)		-	ay/Year Filed)	∑ Yes	∐ No				
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	(Number)	(Country)		(Month/Da	ny/Year Filed)	☐ Yes	□ No				
	(Number)	(Country)		(Month/Da	ay/Year Filed)	Yes	□ No				
	(Number)	(Country)	·	(Month/Day/Year Filed)		Yes	□ No				
	I hereby claim the ben	efit under Title 3	5, United States Code, §			applications(s) lis	sted below.				
Insert Provisional Application(s): (if any)	(Application Number)			(Filing I	Oate)						
	(Application Number)	(Application Number) (Filing Date)									
	All Foreign Application the Filing Date of This	ns, if any, for ar Application:	y Patent or Inventor's C	ertificate Filed N	More than 12 Months (6	6 Months for Des	igns) Prior to				
Insert Requested Information: (if appropriate)	Country		Application Number		Date of Filing (Montl	h/Day/Year)					
······································	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.										
nsert Prior U.S. Application(s): if any)	(Application Number)		(Filing Date)		(Status - patented, pe	nding, abandone	d)				
age 1 of 2 Rev. 05/2004)	(Application Number)		(Filing Date)		(Status - patented, per	nding, abandone	d)				

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Determent is Signed

Insert Residence Insert Citizenship

Insert Post Office Address

Full Name of Second Inventor, if any: see above

Full Name of Third Inventor, if any: see above

Full Name of Fourth Inventor, if any: see above

Full Name of Fifth Inventor, if any: see above

Full Name of Sixth Inventor, if any: see above I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. GIVEN NAME/FAMILY NAME INVENTOR'S SIGNATURE 2005 Hans LOIBNER Residence (City, State & Country) CITIZENSHIE A-1238 Vienna, Austria Austrian MAILING ADDRESS (Complete Street Address including City, State & Country) Heimgasse 23, A-1238 Vienna, Austria GIVEN NAME/FAMILY NAME INVENTOR'S SIGNATURE DATE* 7.2.05 Gottfried HIMMLER Residence (City, State & Country) CITIZENSHIP Austrian A-1180 Vienna, Austria MAILING ADDRESS (Complete Street Address including City, State & Country) Colloredogasse 29, A-1180 Vienna, Austria INVENTOR'S SIGNATURE GIVEN NAME/FAMILY NAME DATE* Hellmut SAMONIGG Residence (City, State & Country) CITIZENSHIP Austrian A-8043 Graz, Austria MAILING ADDRESS (Complete Street Address including City, State & Country) Josefweg 45/B, A-8043 Graz, Austria GIVEN NAME/FAMILY NAME INVENTOR'S SIGNATURE DATE* Eugen STERMETZ 7.2.05 Residence (City, State & Country) CITIZENSHIE A-1010 Vienna, Austria Austrian MAILING ADDRESS (Complete Street Address including City, State & Country) Biberstrasse 9/13, A-1010 Vienna, Austria GIVEN NAME/FAMILY NAME INVENTOR'S SIGNATURE DATE* anlos Andreas HAUER Residence (City, State & Country) CITIZENSHIP A-1160 Vienna, Austria Austrian MAILING ADDRESS (Complete Street Address including City, State & Country) Ottakringerstrasse 137/15, A-1160 Vienna, Austria GIVEN NAME/FAMILY NAME INVENTOR'S SIGNATURE DATE* uda Redl Tel. 3,2005 Gerda REDL Residence (City, State & Country) CITIZENSHIP A-2301 Rutzendorf, Austria Austrian MAILING ADDRESS (Complete Street Address including City, State & Country) Ortsstrasse 5, A-2301 Rutzendorf, Austria

Page 2 of 2 (Rev. 05/2004)

*DATE OF SIGNATURE

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ill Name of First	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		To A MITTLE				
all Name of First or Soje Inventor: set Name of Inventor: set Date This Document is Signed	,			DATE*				
	Hans LOIBNER Residence (City, State & Country)	1 X	CONTROL OF THE					
sert Residence sert Citizenship →	A-1238 Vienna, Austria		CITIZENSHIP Austrian					
sert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)							
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II Name of Second Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above	Gottfried HIMMLER	>		>				
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	Colloredogasse 29, A-1180 Wienna, Austria							
II Name of Third nventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
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	Residence (City, State & Country)		CITIZENSHIP					
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	Josefweg 45/B, A-8043 Graz, Austria							
l Name of Fourth oventor, if any:								
	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	GIVEN NAME/FAMILY NAME Eugen STERMETZ	INVENTOR'S SIGNATURE		DATE*				
nventor, if any:	,		CITIZENSHIP	×				
nventor, if any:	Eugen STERMETZ		CITIZENSHIP Austria	×				
nventor, if any:	Eugen STERMETZ Residence (City, State & Country)	×	1	×				
nventor, if any:	Eugen STERMETZ Residence (City, State & Country) A-1010 Vienna, Austria	cluding City, State & Country)	1	×				
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^{*}DATE OF SIGNATURE